

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m E</i>		7/13/00
O.I.P.E. CLASSIFIER		49	7/17/00
FORMALTY REVIEW		69652	08/30/00
RESPONSE FORMALTY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 -+ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	7/13/00
2	7/13/00
3	7/13/00
4	7/13/00
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49	7/13/00
50	7/13/00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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